



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Olive Ely
History: O reports that Olive just doesn't seem right. She is moaning more with movements and not jumping quite as much. I did treat her for back pain 2 months ago. That back pain was not as obvious on recent exam. Currently conducting an NSAID pain relief trial.

SPECIES Abnormal PE/Chem/CBC/UA Results: UA - WNL except 3+ protein. UPC = 2.5 Olive did have UTI 1 month ago and was treated for this Chem/CBC/T4 are WNL except ALT = 130 and ALP = 189
Canine

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED Shih Tzu
Urinary System

SEX The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended. A small amount of suspended echogenic debris is observed within the lumen. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.
Female, spayed

AGE The left kidney is normal size (4.56 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. Trace pyelectasia is present (0.18 cm in the transverse plane). There is no evidence of nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.
13 Yrs.

WEIGHT The right kidney is normal in size (4.37 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.
11 lbs.

INTERPRETED BY Adrenal Glands

Andrea Nicastro, DVM,
 Diplomate ACVIM
 (Small Animal Internal
 Medicine)

The left adrenal gland is borderline enlarged (0.40 cm at cranial pole) (0.59 cm at caudal pole); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

IMAGING PERFORMED BY

Dr. Velasco

The right adrenal gland is borderline enlarged (1.13 cm at cranial pole) (0.57 cm at caudal pole) (1.57 cm in length) with a normal shape and smooth peripheral contours. A 0.70 x 0.50 cm hyperechoic nodule is observed at the caudal pole. The glandular echogenicity and detail at the cranial pole are unremarkable. The phrenicoabdominal vein and surrounding vasculature are normal.

HOSPITAL NAME Spleen

Bethany Family PC

The spleen is normal in size (1.08 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

REFERRING VET Liver

Dr. Velasco

The liver is subjectively enlarged with swollen peripheral contours. The parenchyma is isoechoic relative to the spleen and diffusely heterogeneous in appearance with a few ill-defined hyperechoic nodules/areas. Vascular and biliary tracts are of normal volume with no evidence of congestion. The gall bladder lumen is moderately distended. The wall is normal in thickness. A large amount of aggregated echogenic suspended sludge is observed within the lumen along with an accumulation of mineralized sand/choledocoliths. The cystic and common bile ducts are normal/not seen.

INVOICE
12707

DATE

12/14/21



PATIENT

Gastrointestinal

Olive Ely

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is not dilated. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

SPECIES

Canine

Pancreas

BREED

Shih Tzu

The region of the right limb is isoechoic relative to surrounding omental fat. No focal lesions are observed. The pancreatic duct is not overtly dilated. See *Other*.

Free Abdomen

SEX

Female, spayed

There is no evidence of free fluid.

Lymph Nodes

AGE

13 Yrs.

See *Other*.

Other

WEIGHT

11 lbs.

A 2.36 x 2.06 cm slightly irregular echogenic to heterogeneous area/nodule/mass is observed in the left cranial to mid-abdomen in the region of the left limb of the pancreas.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(*Small Animal Internal
Medicine*)

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- The origin of the nodule/mass observed in the region of the left limb of the pancreas is unclear. It may be arising from pancreas, lymph node, mesentery, other. Differentials include inflammatory focus, tumor, granuloma, other.
- Non-specific diffuse hepatopathy. Differentials include inflammatory/immune mediated disease, hepatotoxicity (i.e., copper), infiltrative neoplasia (less likely) +/- concurrent age-related change.

IMAGING PERFORMED BY

Dr. Velasco

Secondary Findings:

HOSPITAL NAME

Bethany Family PC

- Mild bilateral adrenomegaly. The right adrenal nodule trends toward the benign (i.e., a regenerative nodule) with lower potential for emerging neoplasia.
- Minor age-related renal changes with right dystrophic mineralization.
- Urinary bladder debris.
- Gallbladder sludge with mineralized sand/choledocoliths.

REFERRING VET

Dr. Velasco

INVOICE
12707

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

DATE

12/14/21



PATIENT

Olive Ely

SPECIES

Canine

BREED

Shih Tzu

SEX

Female, spayed

AGE

13 Yrs.

WEIGHT

11 lbs.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Dr. Velasco

HOSPITAL NAME

Bethany Family PC

REFERRING VET

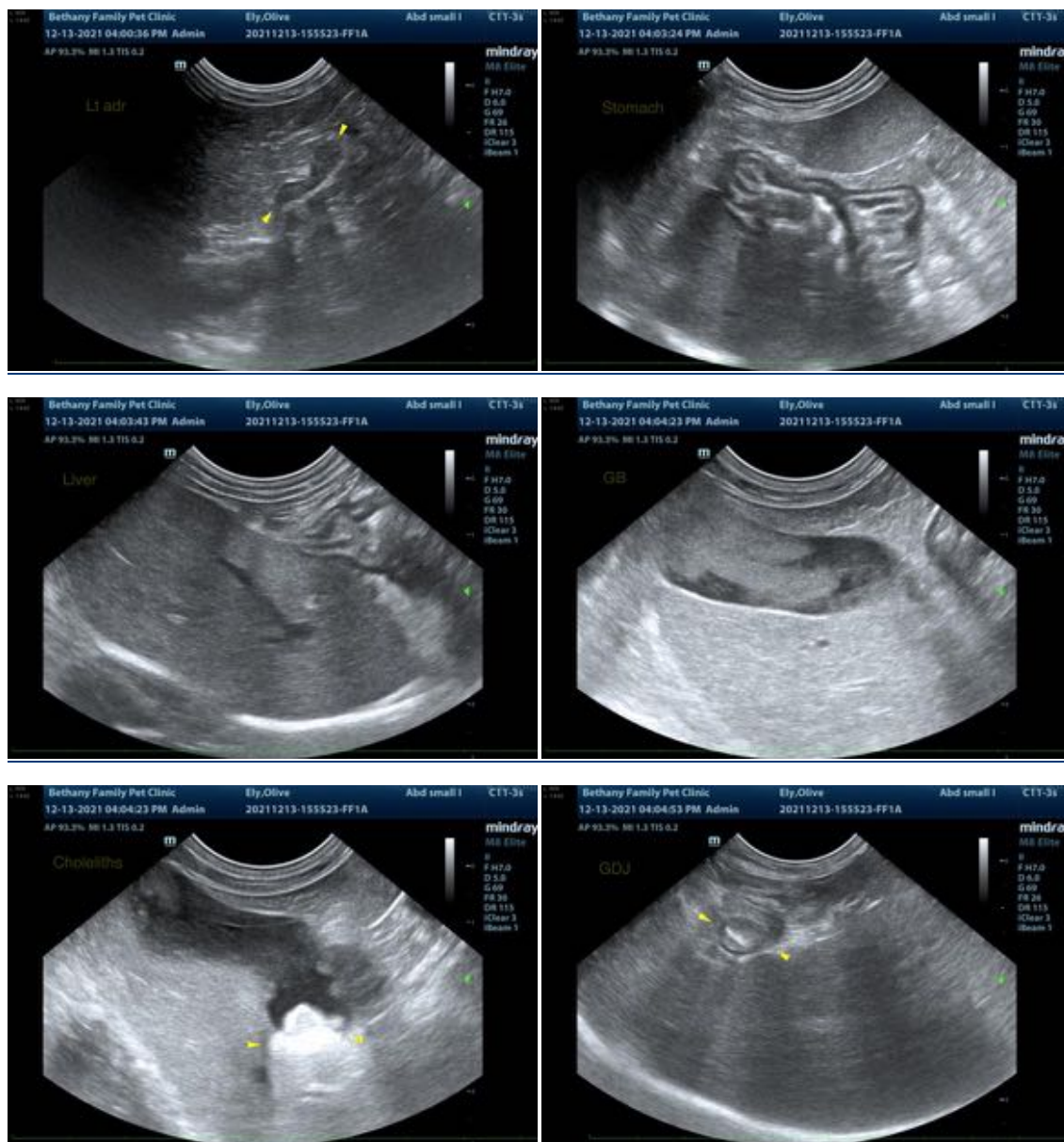
Dr. Velasco

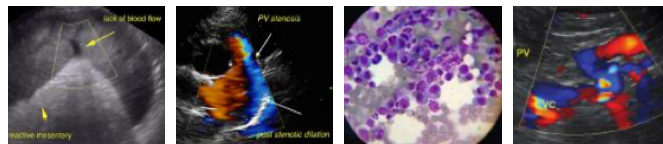
INVOICE
12707

DATE

12/14/21

- Additional sonographic images of the lesion in the left cranial-to-mid-abdomen is recommended for further evaluation/identification. Consider a fine needle aspirate of this lesion (if clotting status is appropriate).
- Three-view thoracic radiographs are recommended to assess for pulmonary metastatic disease and possible bony lesions that may be contributing to the patient's discomfort.
- Given the history of a UTI, a repeat urine culture and sensitivity is recommended. If the culture is negative, consider further treatment for the proteinuria (i.e., angiotensin receptor blocker, antithrombotic agent (i.e., clopidogrel), omega-3 fatty_acids, prescription renal diet) along with obtaining a baseline blood pressure measurement.





PATIENT

Olive Ely

SPECIES

Canine

BREED

Shih Tzu

SEX

Female, spayed

AGE

13 Yrs.

WEIGHT

11 lbs.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(*Small Animal Internal
Medicine*)

**IMAGING
PERFORMED BY**

Dr. Velasco

HOSPITAL NAME

Bethany Family PC

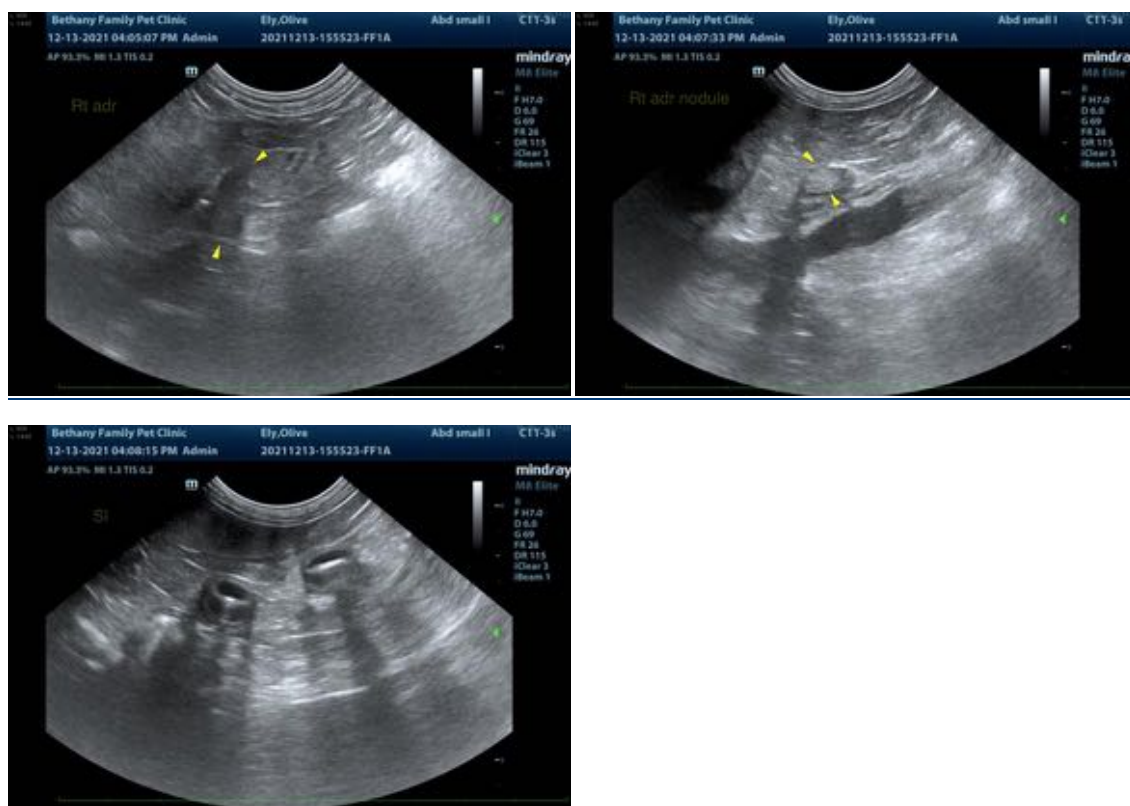
REFERRING VET

Dr. Velasco

**INVOICE
12707**

DATE

12/14/21



The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)

Andrea.nicastro@sonopath.com